

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION OMB APPROVAL

OMB Number: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per response......16.00

SEC USE ONLY



Name of Offering(check if this is an amendment and name has changed, and indicate change.) Offering of Series A-1 Preference Shares	06042491
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Sino Credit Corporation	
Address of Executive Offices (Number and Street, City, State, Zip Code) Suite 501, Dong Sheng Plaza, No. 8 Zhong Guan Cun East Road, Hai Dian District Beijing 100083	Telephone Number (Including Area Code) (86 10) 8252-6098
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Consumer Credit	
Type of Business Organization Corporation	lease specify):
Actual or Estimated Date of Incorporation or Organization: Month Year Actual or Estimated Date of Incorporation or Organization: Month Year O 2 0 5 Actual Estin Lestin Durisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)	nated THOMSON FINANCIAL
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D of 77d(6). When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, is due, on the date it was mailed by United States registered or certified mail to that address. Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 2054 Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures. Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously supplied be filed with the SEC. Filing Fee: There is no federal filing fee.	notice is deemed filed with the U.S. Securities and if received at that address after the date on which it 9. y signed. Any copies not manually signed must be the name of the issuer and offering, any changes

have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed. -ATTENTION-

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control



		A, BASIC ID	ENTIFICATION DATA					
Each beneficial own	the issuer, if the issuer having the power	ollov/ing: suer has been organized er to vote or dispose, or di	within the past five years; rect the vote or disposition o		a class of equity securities of the issuer.			
 Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. 								
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if Tu, Darwin	individual)							
Business or Residence Addre c/o Sino Credit Corporati	ess (Number and Son, Suite 501, I	Street, City, State, Zip Cong Sheng Plaza, No	code) o. 8 Zhong Guan Cun Ea	ast Road, Hai D	vian District, Beijing, China 100083			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, Cui, Wenyan	if individual)		·					
Business or Residence Addrec/o Sino Credit Corporati				ast Road, Hai D	oian District, Beijing, China 100083			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, SIG China Investment On								
Business or Residence Addresuite 5711, Plaza 66, 126								
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, Tan, Peter	if individual)							
Business or Residence Addr c/o SIG China Investmen				Shanghai, Chin	na 200040			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, Weidenmiller, Ryan	if individual)							
Business or Residence Addr c/o SIG China Investmen				Shanghai, Chin	na 200040			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, Upgrade Inc.	if individual)							
Business or Residence Address Room 3511, Bank of Am								
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, Calver Investments Limit								
Business or Residence Addr Room 3511, Bank of Am								
	(Unall)				a)			

			A, BASIC IDE	NTIFICATION DATA			
Each beneficial own	he issuer, if the iss ner having the power icer and director of	uer har to ve corp	as been organized was one or dispose, or direct or dispose, or direct orate issuers and of o	within the past five years; ext the vote or disposition of corporate general and man			of equity securities of the issuer. rship issuers; and
Check Box(es) that Apply:	Promoter		Beneficial Owner	Executive Officer	□ Director		General and/or Managing Partner
Full Name (Last name first, if Fang, Alex	individual)		<u> </u>				
Business or Residence Addr c/o Calver Investments L	ess (Number and Simited, Room 35	Street,	, City, State, Zip Co Bank of America	ode) Tower, 12 Harcourt R	oad, Central, H	ong K	Cong
Check Box(es) that Apply:	Promoter		Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first,	if individual)						
Business or Residence Addr	ess (Number and S	Stræ	, City, State, Zip Co	ode)			
Check Box(es) that Apply:	Promoter		Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first,	if individual)	-					
Business or Residence Addr	ess (Number and S	Street,	, City, State, Zip Co	ode)			
Check Box(es) that Apply:	Promoter		Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first,	if individual)						
Business or Residence Address	ess (Number and S	Street	, City, State, Zip Co	ode)		_	
Check Box(es) that Apply:	Promoter		Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first,	if individual)						
Business or Residence Address	ess (Number and S	Street	City, State, Zip Co	ode)			
Check Box(es) that Apply:	Promoter		Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first,	if individual)					-	
Business or Residence Address	ess (Number and S	Street,	, City, State, Zip Co	ode)			
Check Box(es) that Apply:	Promoter		Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first,	if individual)					_	
Business or Residence Address	ess (Number and S	Street,	, City, State, Zip Co	ide)			
	- 						

B. INFORMATION ABOUT OFFERING													
									Yes	No			
1.	,											\boxtimes	
	Answer also in Appendix, Column 2, if filing under ULOE.												
2. What is the minimum investment that will be accepted from any individual?										•••••	\$ N/A Yes	No	
Does the offering permit joint ownership of a single unit?												5 2	
3. 4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any											,	لسبا
							rs in connec						
	states,	list the nam	ne of the bro	ker or deal	er. If more	than five (5	5) persons to	be listed a					
states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
Full	Name (Last name	first, if indiv	ndual)									
Bus	iness or	Residence .	Address (Nu	umber and S	Street, City,	, State, Zip	Code)		-				
Nan	ne of As	sociated Br	oker or Dea	ler									
State	es in WI	hich Person	Listed Has	Solicited or	Intends to	Solicit Pure	chasers				· · · · · · · · · · · · · · · · · · ·	·	
	(Che	eck "All Sta	tes" or check	k individua	States)							🗆 A	All States
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	RI	SC	SD	TN	TX	UT	VT	VA	WA	wv	WI	WY	PR
Full	Name (Last name t	first, if indiv	idual)									
Busi	iness or	Residence .	Address (Nu	ımber and S	Street, City,	State, Zip	Code)					· · · · · · · · · · · · · · · · · · ·	
Nam	ne of As	sociated Br	oker or Dea	ler									
State	es in WI	nich Person	Listed Has	Solicited or	Intends to	Solicit Puro	chasers				 -		
	(Che	eck "All Sta	tes" or check	k individual	States)							🗆 A	All States
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Full	Name (Last name f	first, if indiv	ridual)									
Busi	iness or	Residence A	Address (Nu	imber and S	street, City,	State, Zip (Code)						
Nam	ne of As	sociated Bro	oker or Dea	ler									
State			Listed Has			Solicit Purc	chasers						
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İ	RI	SC	SD	TN	1X	UT	VT	VA	WA	wv	wı	WY	PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\subseteq \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price		Amount Already Sold
	Debt\$	0	\$	0
	Equity\$			
	☐ Common ☒ Preferred			
	Convertible Securities (including warrants)	0	\$	0
	Partnership Interests\$			0
	Other (Specify \$			0
	Total			
	Answer also in Appendix, Column 3, if filing under ULOE.		. Ψ.	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	2		1,679,999.96
	Non-accredited Investors	0		§ C
	Total (for filings under Rule 504 only)	0	5	\$0
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505	0	9	s0
	Regulation A	0	9	s0
	Rule 504	0	5	s0
	Total	0	9	s0
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees		\$	0
	Printing and Engraving Costs	_	\$	
	Legal Fees	_	\$	75,000.00
	Accounting Fees			0
	Engineering Fees	_		0
	Sales Commissions (specify finders' fees separately)	_		0
	Other Expenses (identify)	_	\$	
	Total			

	C. OFFERING PRICE, NU	MBER OF INVESTORS, EXPENSES AND USE OF	F	PROCEEDS				
	b. Enter the difference between the aggregate office and total expenses furnished in response to Part C proceeds to the issuer."		SS		\$_		1,604,999.9	<u>5</u>
i.	Indicate below the amount of the adjusted gross p each of the purposes shown. If the amount for a check the box to the left of the estimate. The total proceeds to the issuer set forth in response to Par	any purpose is not known, furnish an estimate at of the payments listed must equal the adjusted groups.	nd	i				
				Payments to Officers, Directors, &]	Payments to	
		_	_	Affiliates	_		Others	_
	Salaries and fees					\$_		0
	Purchase of real estate] :	\$0		\$_		C
	Purchase, rental or leasing and installation of ma	achinery	3	¢ 0		•		€
	Construction or leasing of plant buildings and fa				-			(
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	Acquisition of other businesses (including the va offering that may be used in exchange for the as:	sets or securities involved in this						
	issuer pursuant to a merger)					\$_	·	(
	Repayment of indebtedness]	\$ 200,000.00		\$_		(
	Working capital		-			_	1,404,999.) (
	Other (specify):] :	\$		\$_	<u></u>	(
			_]	s0		\$_		(
	Column Totals					\$_	1,404,999.	96
	Total Payments Listed (column totals added)			⊠.s	1.60	4.9	99.96	
	2000 (00.000 000.000 000.000)	D. FEDERAL SIGNATURE						_
		D. FEDERAL SIGNATURE		<u> </u>				-
ig	e issuer has duly caused this notice to be signed by t nature constitutes an undertaking by the issuer to fur formation furnished by the issuer to any non-accrec	rnish to the U.S. Securities and Exchange Commis	sic	on, upon writte				
ss	uer (Print or Type)	Signature 11	D	Date				_
Sir	o Credit Corporation	1	Jŧ	uly 13, 2006				
۱a	me of Signer (Print or Type)	Title of Signer (Print or Type)						_
Эa	rwin Tu	Chairman of the Board of Directors						
_								-

-- ATTENTION ----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)